

GIC Health Plan Rates – Monthly Rates as of July 1, 2010

For THE CITY OF MELROSE ENROLLEES



Active Employees, Retirees, and Survivors *WITHOUT MEDICARE*

Includes 0.33% Administrative Fee



	Employee and Non-Medicare Retiree/Survivor Pays Monthly %	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$
HEALTH PLAN		Individual Coverage	Family Coverage
Fallon Community Health Plan Direct Care	13%	\$ 54.11	\$129.87
Fallon Community Health Plan Select Care	13%	64.91	155.78
Harvard Pilgrim Independence Plan	13%	78.65	192.11
Harvard Pilgrim Primary Choice Plan	13%	62.42	152.47
Health New England	13%	54.00	133.86
Tufts Health Plan Navigator	13%	75.64	183.65
Tufts Health Plan Spirit	13%	60.02	145.76
NHP Care (<i>Neighborhood Health Plan</i>)	13%	53.94	142.93
UniCare State Indemnity Plan/Basic <i>with</i> CIC (<i>Comprehensive</i>)	40%	322.61	753.19
UniCare State Indemnity Plan/Basic <i>without</i> CIC (<i>Non-Comprehensive</i>)	40%	307.74	718.71
UniCare State Indemnity Plan/Community Choice	13%	53.04	127.29
UniCare State Indemnity Plan/PLUS	13%	73.17	174.62

Retirees and Survivors *WITH MEDICARE*

	Retiree and Survivor Retiree/Survivor Pays Monthly Per Person	
HEALTH PLAN	%	\$
Fallon Senior Plan*	30%	\$ 67.88
Harvard Pilgrim Medicare Enhance	30%	113.84
Health New England MedPlus	30%	109.01
Tufts Health Plan Medicare Complement	30%	105.58
Tufts Health Plan Medicare Preferred*	30%	66.97
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with</i> CIC (<i>Comprehensive</i>)	30%	108.98
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without</i> CIC (<i>Non-Comprehensive</i>)	30%	105.78

* Rates are subject to federal approval and may change January 1, 2011.

Rates are Calculated by the City of Melrose Benefits Office.

Rate questions? Call: 781.979.4145